

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	FL		8-15-01
O I P.E. CLASSIFIER			
FORMALITY REVIEW	TT	953	09-18-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date	Claim	Date	Claim	Date
Final		Final		Final	
Original		Original		Original	
12		51		101	
12		52		102	
22		53		103	
0203		54		104	
CD	✓	55		105	
2	✓	56		106	
3		57		107	
4		58		108	
5		59		109	
6		60		110	
7		61		111	
8		62		112	
9		63		113	
10		64		114	
11	✗	65		115	
12		66		116	
13		67		117	
14		68		118	
15		69		119	
16		70		120	
17		71		121	
18		72		122	
19		73		123	
20		74		124	
21		75		125	
22		76		126	
23	✓	77		127	
24		78		128	
25		79		129	
26		80		130	
27		81		131	
28		82		132	
29		83		133	
30		84		134	
31		85		135	
32		86		136	
33		87		137	
34		88		138	
35		89		139	
36		90		140	
37		91		141	
38		92		142	
39		93		143	
40		94		144	
41		95		145	
42		96		146	
43		97		147	
44		98		148	
45		99		149	
46		100		150	
47					
48					
49					
50					

If more than 150 claims or 10 actions  
staple additional sheet here

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